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25885	7590 91/30	v2009	have	e its own certificate o	f mailing or transmission.	_
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INDIANAPOLI	S. IN 46206-6288			(Depositor's name)		
						(Signature)
•						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	1,	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/541,047	06/29/2005		Andreas Gerhard Weicher	t	X-16029	6092
TITLE OF INVENTION: SUBSTITUTED ARYLCYCLOPROPYLACETAMIDES AS GLUCOKINASE ACTIVATORS						
APPLN, TYPE	SMALL ENTITY	ISSUE PEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/30/2009
EXAN	INER	ART UNIT	CLASS-SUBCLASS			
KOSACK, JOSEPH R		1626	514-363000	•	•	
CFR 1.36.3). Change of corresp Address form PTO/S "Fee Address" inc	ence address or indication mondence address (or Cha B/122) attached. lication (or "Fee Address 02 or more recent) attach	inge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	pe)	**************************************	
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Eli Lilly and Company Indianapolis, Indiana						
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) are submitted: 4 4 4 4 4 4 4 4 4 4 4 4 4			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 05-0840 (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
NOTE: The Issue Fee an interest as shown by the	nd Publication (see (if req records of the United Sta	uired) will not be accepte ites Patent and Trademark	ed from anyone other than the Office.	he applicant; a regist	ered attorney or agent; or the	he assignee or other party in
Authorized Signature James B. Myels Date 27 April 200 Typed or printed name Somes B- Myers Registration No. 42021						
Typed or printed nam	E SOM	es B. M	4095	Registration No	4202	1
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						